



Scraptoft Valley Primary School

New Romney Crescent
Netherhall
Leicester
LE5 1NG

29th January 2024

Tel: 0116 241 3444
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Children in Class 13 and Class 14

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www.scraptoftvalley.leicester.sch.uk

Dear Parents,

We have organised a trip for all the children in Year 6 to visit **The Warning Zone on Monday 26th February 2024**. This will form an invaluable part of your children's education and their transition to secondary school. It will teach them about how to keep themselves safe in various everyday scenarios as well as an informative and fun session on E-Safety and how to keep themselves safe online.

We will be leaving school at 9.05 and returning at 3.00pm. Children will need a packed lunch. Children that have a Free School Meal Voucher and uptake their meal will have a lunch provided by the school kitchen.

Children must wear school uniform and will need comfortable footwear. There will be no charge for this trip as the school will be paying the costs. *In addition to the Council's liability insurance the LEA recommended school journey insurance has been taken out for this trip. The school will cover the cost for this insurance.*

If you would like to help on this trip please indicate on the slip below. Although we will try to have a mix of men and women helping on this trip this may not be possible. The school's No Smoking Policy and Mobile Telephone policy must be followed by all adults on this trip.

Yours sincerely,

Miss L Craig
Headteacher



Name of Child _____ **Class** _____

Please tick

Permission I give permission for my child to go on the trip as detailed above and if they have an accident be treated by a first aider
I do not give permission for my child to go on the trip

Parental Volunteers I will be able to help if required and agree to adhere to the non smoking and mobile telephone policy (the class teacher will contact you)
Unfortunately I cannot help on this occasion

Collecting Children I will collect my child at 3:10 pm
I will arrange for an adult of suitable family member to collect my child
My child may walk home by themselves

Signed _____ **Parent/Carer with legal parental responsibility**

Telephone